# PROPOSED GOALS AND OBJECTIVES RHODE ISLAND DEPARTMENT OF ELDERLY AFFAIRS STATE PLAN ON AGING FOR THE PERIOD 10/1/11 THROUGH 9/30/15

# **GOAL I**

ENABLE SENIORS TO REMAIN IN THEIR OWN HOMES WITH A HIGH QUALITY OF LIFE FOR AS LONG AS POSSIBLE THROUGH THE PROVISION OF APPROPRIATE HOME AND COMMUNITY-BASED SERVICES, INCLUDING SUPPORTS FOR FAMILY CAREGIVERS

# Objective 1.1

Provide affordable home and community-based care services and living options to prevent or delay institutionalization.

- Continue to implement and expand existing options through federally supported programs within the RI Global Waiver for non-Medicaid eligible individuals, to allow such individuals to remain in the community with necessary health care services and supports. This will delay longterm care facility admission, as well as Medicaid enrollment, for this population.
- Continue to implement and expand existing options through federally supported programs within the RI Global Waiver for **Medicaid** eligible individuals, to allow such individuals to remain in the community with necessary health care services and supports. This will delay long-term care facility admission, as well as reduce Medicaid costs, for this population.
- Expand provision of benefits counseling and other services to older adults of all income levels throughout the State through the regional ADRC offices.
- Increase awareness of energy assistance, property tax reduction, reverse mortgages, and other programs that make it easier for elders to remain in their own homes.
- Promote the Shared Living program, which allows older adults to remain in the community under informal caregiver arrangements.
- Encourage the home-delivered meal provider to improve the homedelivered meals program through volunteer recruitment and other means

# Objective 1.2

Provide opportunities for seniors in nursing homes and discharging from hospitals to return to the community.

# **Strategies:**

- Collaborate with RIDHS in the implementation of the *Money Follows the Person* grant.
- Continue to implement the Coleman care transitions coaching model pursuant to the ADRC Evidence-Based Care Transitions grant and expand care transitions activities.
- Develop a memorandum of understanding with a local hospital regarding care transitions collaboration between the hospital and Rhode Island's Aging and Disability Resource Center (the "ADRC"); if successful, look to expand model to other hospitals and to nursing homes in the State.

# **Objective 1.3**

Provide opportunities for community involvement.

#### Strategies:

- Increase public awareness of programs available by means of the local senior center network, public libraries and the ADRC.
- Collaborate with other agencies within the R.I. Executive Office of Health and Human Services in seeking ways to maintain and expand affordable transportation opportunities for seniors.

#### Objective 1.4

Provide family caregivers with the information they need to make informed decisions and to access services.

#### **Strategies:**

• Promote expansion of respite care for family caregivers, and increase awareness of all available respite care services.

- Increase public awareness of the services adult day care programs provide to elders and their caregivers.
- Encourage the development of caregiver support programs to reduce stress, thereby improving the quality of life and extending the life expectancy of caregivers.

# **Goal I Performance Measures:**

- 1. Individuals leave nursing homes to live in the community through the *Money Follows the Person* program.
- 2. Increase in the number of people receiving care transitions coaching and other assistance.
- 3. Increase in the number of people who participate in home and community care programs.
- 4. Reduction in hospital readmission rates at hospitals that collaborate with RIDEA on care transitions activities.
- 5. Reduction in waiting list for home-delivered meals.
- 6. Continuity of home-delivered meal delivery during inclement weather.
- 7. Improvement in transportation opportunities for seniors and adults with disabilities.

# **GOAL II**

#### EMPOWER OLDER PEOPLE TO STAY ACTIVE AND HEALTHY

# **Objective 2.1**

**Encourage self-management of chronic disease.** 

- Continue to collaborate with the RI Department of Health on the Stanford University Chronic Disease Self-Management Program, which is being implemented in the State of Rhode Island as the *LivingWellRI* program.
- Continue to promote, through local partner agencies, health promotion and medication management outreach activities.
- Work with Rhode Island's medically needy older adults to enroll them in the most appropriate Medicare Part D prescription drug plan for their needs.
- Develop, identify funding for, and implement an interim supplemental state prescription assistance plan to assist Rhode Island's medically needy

#### Objective 2.2

# Promote a healthy lifestyle among older adults.

# **Strategies**:

- Educate older adults about the importance of a healthy diet and encourage participation in congregate meal sites and home delivered meal programs.
- Educate older adults about the importance of exercise and provide opportunities at senior centers and other sites, such as libraries, to participate in exercise and dance classes and other physical activities.
- Encourage use of Title III funds by senior center grantees for exercise and other programs that will help older adults to lead a healthier lifestyle.

# Objective 2.3

#### Engage in falls prevention activities.

- Strengthen collaboration with the RI Department of Health ("RIDOH") on falls prevention activities, such as assisting RIDOH in the implementation of an evidence-based falls prevention program (e.g., Tai Chi or Stepping On).
- Participate in the Falls Prevention Subcommittee coordinated by the RIDOH Violence and Injury Prevention Program.
- Increase awareness among seniors of the issue through the observance of Falls Prevention Awareness Day.

#### **Goal II Performance Measures:**

- 1. Decrease falls among older Rhode Islanders, as evidenced by hospitalization reports obtained from the Rhode Island Department of Health.
- 2. Increase meal site participation.
- 3. Increase participation by older adults in exercise and other activities conducted by senior centers.
- 4. Increase the number of low income seniors assisted with enrollment in Medicare Part D plans.
- 5. Implement interim prescription assistance program.
- 6. Continue, through outside contracted agencies, to hold at least the same number of health promotion and medication management outreach events each year.

7. Increase the number of elders who participate in falls prevention activities.

# **GOAL III**

# ENSURE THE RIGHTS OF OLDER PEOPLE AND PREVENT THEIR ABUSE, NEGLECT AND EXPLOITATION

#### Objective 3.1

Strengthen protection and rights of residents in long term care facilities.

# Strategy:

• Establish, promulgate and implement formal rules, standards, protocols and reporting requirements for the Rhode Island Long Term Care Ombudsman Program that conform with federal guidelines, with input from the public.

#### **Objective 3.2**

Expand access to legal assistance for older people in the community.

#### Strategies:

- Continue to collaborate with Rhode Island Legal Services and the Rhode Island Bar Association to expand or improve the delivery of legal assistance to older persons, especially those with social and/or economic needs.
- Continue to collaborate with Rhode Island Legal Services to conduct outreach and education events for the public regarding elder rights.

# Objective 3.3

Strengthen protections of older people in the community.

- Promote educational and public awareness efforts to empower the general public to report suspected victimization of elders.
- Continue regular meetings with the regional case management agency supervisors to address emerging issues and ensure that seamless protective and social services are delivered to victims of abuse, neglect and exploitation.

- Maintain and strengthen relationship with the Rhode Island Attorney General's Office, with the goal of increasing the percentage of abusers of elders who are tried for their offenses.
- Continue to collaborate with a contracted agency to operate a response
  program for elders in crisis outside of departmental hours of operation, to
  complement existing DEA Protective Service programs and enhance and
  strengthen the ongoing partnership between DEA, public safety personnel,
  and other providers of crisis intervention services for vulnerable elders in
  the community.
- Continue to collaborate with a contracted agency to operate a volunteer guardian program for elders who need a guardian of the person, with a focus on increasing the number of individuals who are willing to serve as volunteer guardians for elders in the community.

# **Goal III Performance Measures:**

- 1. Adopt Long Term Care Ombudsman Program regulations.
- 2. Increase the number of older Rhode Islanders who receive legal assistance through the RILS and RIBA programs.
- 3. Identify funding each year to allow the after hours response program for elders in crisis to continue and to provide the same level of service.
- 4. Increase the number of outreach/public awareness activities.
- 5. Identify funding each year to allow the After Hours Program to continue, and the number of volunteer guardians increases.

#### **GOAL IV**

EMPOWER OLDER PEOPLE AND THEIR FAMILIES TO MAKE INFORMED DECISIONS ABOUT, AND BE ABLE TO EASILY ACCESS, EXISTING HOME AND COMMUNITY-BASED OPTIONS

# Objective 4.1

Help Rhode Island's older adults and their families and caregivers to be well-informed about available options and services.

#### Strategies:

• Increase public awareness of the ADRC, the services it provides, locations and hours of operation.

- Research the possibility of a single "800" number that Rhode Islanders could use to access the ADRC office located closest to them.
- Update and expand resources contained on the ADRC website.
- Develop written operating standards and protocols for the services provided by the various ADRC locations in order to ensure consistency in services, including without limitation options counseling and care transition services. Continue monthly ongoing training sessions for all ADRC staff.

#### Objective 4.2

Continue to work toward a "fully functional" ADRC in Rhode Island.

- Expand the provision of options counseling and assistance in obtaining other services to older adults and adults with disabilities of all income levels throughout the State through regional ADRC offices and/or other means.
- Collaborate with the State's Medicaid office to implement an effective data sharing system that will serve to meet federal requirements for a fully functional ADRC with streamlined access to services.
- Strengthen the partnership with the RI Department of Human Services at the highest levels regarding the ADRC to ensure a collaborative approach to ADRC sustainability.
- Continue to promote and implement the Coleman care transitions coaching model pursuant to the ADRC Evidence – Based Care Transitions grant and expand care transitions activities.
- Develop a memorandum of understanding with a local hospital regarding care transitions collaboration between the hospital and the ADRC; if successful, look to expand model to other hospitals and to nursing homes in the State.
- Expand short-term case management capabilities.
- Improve intake procedures to most efficiently respond to inquiries.
- Provide state-wide access to the ADRC both in-person and by telephone.

# **Goal IV Performance Measures:**

- 1. Increase calls and walk-ins to the ADRC.
- 2. Implement "800" number.
- 3. Update the ADRC website.
- 4. Increase the number of individuals who receive care transitions coaching and other assistance.
- 5. Implement effective data sharing practices between RIDEA and RIDHS to ensure that services are provided in a more seamless and efficient fashion by the ADRC.
- 6. Implement written operating standards and protocols for the services provided by the various ADRC locations; continue trainings of ADRC staff.